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FAX TRANSMITTAL SHEET

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11

Number of Pages (including this page)

Date:

February 18, 2004

To:

Jean B. Corrielus - 2631

Location:

United States Patent and Trademark Office

Fax No.:

(703) 872-9306

From:

Susan C. Hill - 35,896

Subject:

09/497,328- Sepehr Mehrabanzad

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MESSAGE:

Enclosed herewith, please find a FORMAL AMENDMENT for filing in the below-identified application.

	ALL ITEMS MARKED WITH AN "X" ARE INCLUDED:					
i	1.	×	1 page Facsimile Cover Sheet			
	2.	х	6 page Amendment			
	3.	Х	1 page Fee Transmittal (in duplicate)			

4. X 1 page Petition for Extension of Time (in duplicate)

Paid by Deposit Account: 502117 \$420

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS
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ON: 2/18/04

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Elaine

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EXAMINER: Jean B. Corrielus GROUP ART UNIT: 2631 SERIAL NO.: 09/497,328 FILED: FEBRUARY 3, 2000

INVENTOR: SEPEHR MEHRABANZAD

FEB.18.2004 10:11AM CORPLAW 512 996 6853

									
	Complete if Known						i		
FI	Application Number		09/497,328				<u>:</u>		
TRANS	Filing Date		Febr	·					
Patent fees are subj	First Named In	First Named Inventor Sepehr Mehrabanzad				ad	· · · · · · · · · · · · · · · · · · ·		
Applicant claims small	entity status. See 37 CFR 1.27	Examiner Nam	Jean B. Corrielus						
	Group Art Unit	Group Art Unit 2631							
TOTAL AMOUNT OF PAYMENT	(\$) 420	Attorney Docke	Attorney Docket No. CX098043					Ĭ	
METHOD OF)	FEE CALCULATION (continued)							
Check Credit card	None	3. ADDITIONAL FEES							
X Deposit Account:	_	Large Small Entity Entity							
Deposit Account		Fee	Fee	Fee	Fee		!		
Deposit Accour	nt Name Motorola, Inc.		Code	(\$)	Code	(\$)	Fee Description	;	
The Director is authorized to: (ch			1051 1052	130 50	2051 2062	65 25	Surcharge - late filling fee or oath Surcharge - late Provisional filling		
X Charge fee(s) indicate	ed below X Credit any ov	erpayments	1052	130	1053	130	Non-English specification	⊢	
Charge eny additiona	I fee(s) during the pendency of this app	olication	1812	2520	1812	2520	For filing a request for ex parte Reexamination		
	ated below, except for the filing fee to	the	1804	920°	1804	920*	Requesting publication of SIR prior to		
above-Identified dep	osit account.		1805	18401	1805	1840*	Examiner action Requesting publication of SIR after Examiner action		
F	EE CALCULATION		1251	110	2251	55	Extension for reply within first monit		
			1252	420	2252	210	Extension for reply within second month	420	
			1253	950	2253	475	Extension for raply within third month		
1. BASIC FILING FEE	•		1254	1480	2254	740	Extension for reply within fourth month	.	
			1255	2010	2255	1005	Extension for reply within fifth month	1	
Large Entity Small	Entity	ì	1401	330	2401	165	Notice of Appeal		
Fee Fee Fee	Fee		1402	330	2402	165	Filing a brief in support of an appeal	' 	
Code (\$) Code	(\$) Fed	e Paid	1403	290	2403	145	Request for oral hearing Petition to institute a public use		
			1451	1510	1451	1510	proceeding		
1001 770 2001	385 Utility filing fee		1452	110	2452	65	Petition to revive – unavoidable	<u>:</u>	
1002 340 2002	170 Design filing fee		1453	1330	2453	665	Petition to revive – unintentional	├	
1003 530 2003	265 Plant Illing fee	_	1501	1330	2501	665	Utility Issue (ee (or reissue)		
1004 780 2004 1005 160 2005	385 Reissue filling fee 80 Provisional filling fee	_	1502 1503	480 640	2502 2503	240 320	Design issue fee Plant issue fee	 	
1005 100 2005	oo Provisiona iliing lee		1460	130	1460	130	Petitions to the Commissioner	├	
	SUBTOTAL (1) (\$)	1	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
2. EXTRA CLAIM FEES	302 (311.24)		1806	180	1806	180 -	Submission of IDS		
	eviously Extra Fee from		8021	40	8021	40	Recording each patent assignment	├ ─┤	
FIX	Paid** Claims below	Fee Pald	5021	+0	0021	40	per property (times number of properties)	 	
Total Claims -	20 = X 10	=	1809	770	2809	385	Filing a submission after final		
Independent Claims	3 = X 86	□ └					rejection (37 CFR § 1.129(a))		
Multiple Dependent	280	<u>-</u>	1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	ļJ	
Large Entity Small	Entity		1801	770	2801	385	Request for Continued Examination		
Fee Fee Fee Code (\$) Code	Fee (\$) Fee Description		1802	900	1802	900	(RCE) Request for expedited examination	(
1202 18 2202	9 Claims in excess of 20	"				•••	of a design application	;	
1201 84 2201	42 Independent claims in excess of 3	,	Other lee (specify)					
1203 280 2203 1204 84 2204	 Multiple dependent claim, if not pake Reissue independent claims over 								
1207 04 2204	measure injurpendent ciding Over	Authorn barent				-			
1205 18 2205 9 *Reissue claims in excess of 20 and over original									
palent									
SUBTOTAL (2) (\$) SUBTOTAL (3) (\$) 420 "or number previously paid, if greater; For Reissues, see above. SUBTOTAL (3) Reduced by Basic Filing Fee Paid									
SUBMITTED BY Complete (If applicable)									
	Susan C. Hill	Registrati	on No.	35,89	6		2) 996-3839		
	9211			1	T	2/14/0			
Signature	COTIL NO PLACE 1 /	~ ~ V . I U) Da		<i>f</i>	